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PTO/SB/01 (12-97)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☑ Declaration Submitted with Initial Filing

OR

•
 Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

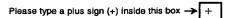
Att rn y Docket Nun	nber	IN0964Q		
First Named Inventor		STALGIS, et al		
COMPL	ETE II	KNOWN		
Application Number		/		
Filing Date	Dec	cember 16, 1999		
Group Art Unit	To Be Assigned			
Examiner Name	То І	Be Assigned		

As a below named invent	As a below named inventor, I hereby declare that:							
My residence, post office address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
RIBAVAF	IN-PEGYLATED IN	TERFERON ALI	A INDUCTION	ON HCV				
	COMBINA	ATION THERAPY						
	the specification of which (Title of the Invention)							
is attached hereto								
was filed on (MM/D	D/YYY)	as Uni	ted States Applica	tion Number or P	CT International			
Application Number	and wa	as amended on (MM/DD/	YYYY)		(if applicable).			
I hereby state that I have re amended by any amendme	viewed and understand the ont specifically referred to abo	contents of the above ide	ntified specificatio	n, including the c	laims, as			
I acknowledge the duty to d	lisclose information which is	material to patentability a	s defined in 37 CF	R 1.56.				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	py Attached? _NO			
			0000	0000	0000			
Additional foreign applica	ation numbers are listed on a	supplemental priority da	ta sheet PTO/SB/0)2B attached here	eto:			
I hereby claim the benefit u	inder 35 U.S.C. 119(e) of an	y United States provision	al application(s) lis	sted below.				
Application Number	(s) Filing Date	e (MM/DD/YYYY)						
60/112,773		numb supple	onal provisiona ers are listed or emental priority SB/02B attache	n a data sheet				

[Page 1 of 2]

CERTIFICATE OF MAILING									
I hereby certify that this correspondence is being denvelope addressed to: Assistant Commissioner fo	eposited with the United States Postal Service <u>as fir</u> r Patents, Washington, D.C. 20231 on this date:	st class mail in an							
Typed or printed name									
Signature	Date								

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	Date	Dec. 16, 1999	



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DECLARATION

REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)

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Cynthia L. Foulke	32364	Anita W. Magatti	29825		
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Kenneth M. Goldman	34174	Edward H. Mazer	27573		
James M. Gould	33702	Jaye P. McLaughlin	41211		
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Palaiyur S. Kalyanaraman	34634	Paul A. Thompson	35385		
Gerald P. Keleher	43707	Joanne P. Will	35737		
·		Donald W. Wyatt	40879		

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filling date of this application.												
U.	S. Pare	ent Application		PCT Parent				iling Date D/YYYY)			nt Patent N (if applicat	
Additional	U.S. or P	CT international	applicati	ion numbers ar	e listed on	a supr	olement	al priority data	sheet P	TO/SB/	02B attached h	ereto.
As a named inventor, I hereby appoint the following registered practitioner and Trademark Office connected therewith: Customer Number					actitioner(s) to pr	osecute	this applicat	on and to	transa	ct all business Place Custo	
and mass	0	7#100104 I.I.O.		OR							Number Bar	Code
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Additional r	registered	practitioner(s) n	amed or	n supplemental	Registere	d Prac	titioner I	Information st	neet PTO	/SB/020	attached here	ito.
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Name	THO	MAS D. HO	FFMA	.N								
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City	Kenil	worth		· • • • • • • • • • • • • • • • • • • •		s	tate	NJ	ZIP	070	33-0530	
Country	USA			Telephon	1e (908	3) 298) 298-5037		Fax	Fax (908) 298-5388		3
believed to be punishable by	true; and	I statements ma d further that the nprisonment, or t issued thereon.	ese state both, un	ements were m	nade with t	the kno	owledge	that willful f	alse state	ements	and the like sa	o made are
Name of So	ole or F	First Invento	r:				A petiti	on has beer	n filed fo	r this u	ınsigned inve	ntor
Gi	ven Nan	ne (first and mi	iddle [if	any])		-	Family Name or Sumame					
CARLOS	, O.		-0			STALGIS				<u>.</u>		
Inventor's Signature		Kewlne	l. Stew	m/2							Date	12.10.99
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Post Office A	ddress	166 Skyli	ne Dri	ve								
Post Office A	ddress										<u></u> _	
City	Millin	gton	State	NJ	ZIP	, 0	7946		Cou	ntry	USA	
Additional	invento	rs are being na	o bems	n the su	pplement	tal Ad	ditional	Inventor(s)	sheet(s) PTO/	SB/02A attac	hed hereto



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ADDITIONAL INVENTOR(S) Suppl mental She t

Name of Addition	nal Joint Inventor, if an	y:			A petitic	on has been file	ad for th	is unsigr	ned inv	entor
Given Nar	me (first and middle [if any]))		Family Name or Surname						
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Inventor's Signature	Janier K. al	Uree.	nt					Date		149/99
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Post Office Address										
City	Winter Park	State	FL		ZIP	USA	Country	US	Α	
Name of Addition	nal Joint Inventor, if an	y:			A petitic	on has been file	ed for th	is unsign	ned inv	entor
Given Nar	me (first and middle [if any]))		\Box		Family Na	me or S	Sumame		
PAUL, W.					GLUE					
Inventor's Signature	Paul. W SZ						te	12-9-99		
Residence: City	Flemington	State	NJ	\perp	Country	USA	·	Citize	nship	NZ
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Post Office Address			<u></u>							
City	Flemington	State	NJ		ZIP	08822	Coun	itry	USA	
Name of Addition	nal Joint Inventor, if an	ıy:			A petitic	on has been file	ed for th	is unsigr	ned inv	entor
Given Nar	me (first and middle [if any]))				Family Na	ıme or §	Surname		
Inventor's Signature								Da	te	
Residence: City		State			Country			Citize	nship	
Post Office Address										
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City		State			ZiP		C	ountry		

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